



08-04-03

3747

PTO/SB/122 (10-01)  
Approved for use through 10/31/2002. OMB 0651-0035  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>CHANGE OF CORRESPONDENCE ADDRESS Application</b>  Address to: Assistant Commissioner for Patents Washington, D.C. 20231	Application Number	10/065,362
	Filing Date	October 9, 2002
	First Named Inventor	Jacobus H. Visser
	Art Unit	3747
	Examiner Name	
	Attorney Docket Number	202-1295

8/8/03  
J. Coover

Please change the Correspondence Address for the above-identified application to:		<div>Place Customer Number Bar Code Label here</div>	
<input type="checkbox"/> Customer Number	<div>Type Customer Number here</div>		
OR			
<input checked="" type="checkbox"/> Firm or Individual Name	Kolisch Hartwell, P.C.		
Address	200 Pacific Building		
Address	520 SW Yamhill Street		
City	Portland	State	OR
Country	United States of America		
Telephone	(503) 224-6655	Fax	(503) 295-6679

RECEIVED

AUG 06 2003

TECHNOLOGY CENTER R0700

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- ☐ Applicant/Inventor.
- ☐ Assignee of record of the entire interest.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or Agent of record.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number \_\_\_\_\_

Typed or Printed Name	Allan J. Lippa, Registration No. 32,258
Signature	
Date	7/30/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

<input checked="" type="checkbox"/> *Total of _____ forms are submitted.
--

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

362